

B 1 (Official Form 1) (1/08)

United States Bankruptcy Court		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): SINGLETON ALEXIS E.		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): XXX-XX-8618		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State): 657 N. Austin Blvd, #3 CHICAGO, IL		Street Address of Joint Debtor (No. and Street, City, and State):
County of Residence or of the Principal Place of Business: COOK		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): P.O. Box 2174 Oak Park, IL 60303		Mailing Address of Joint Debtor (if different from street address):
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box.) <input type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input checked="" type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there distribution to unsecured creditors.		
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000- 5,000 <input type="checkbox"/> 5,001- 10,000 <input type="checkbox"/> 10,001- 25,000 <input type="checkbox"/> 25,001- 50,000		Estimated Assets <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million		

U.S. Bankruptcy Court
Northern District of Illinois

Filed: 12/29/2009

Time:

Debtor: Alexis E Singleton

Case: 09-48985

Chapter: 7 Rec. # :

Judge: Susan Sonderby

341 mtg: 02/08/2010 @ 01:00pm

ConfHrg: 12/29/2009 12/29/2009

Trustee: Gregg Szilagyi



1:09BK48985-BK001

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Page 2

Voluntary Petition (This page must be completed and filed in every case.)		Name of Debtor(s): <u>SINGUETON, ALEXIS E.</u>	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)			
Location Where Filed:	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet.)			
Name of Debtor:	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.)	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).	
		X Signature of Attorney for Debtor(s) (Date)	

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

- ☐ Yes, and Exhibit C is attached and made a part of this petition.
- ☐ No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

- ☐ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

- ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box.)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes.)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)
- (Name of landlord that obtained judgment)
- (Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B 1 (Official Form) 1 (1/08)		Page 3
Voluntary Petition (This page must be completed and filed in every case.)		Name of Debtor(s): <u>SINGLETON, LUCAS E.</u>
Signatures		
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X <u>Alexis C. Singleton</u> Signature of Debtor X _____ Signature of Joint Debtor Telephone Number (if not represented by attorney) <u>773 544 6010</u> Date <u>Dec 2009</u>	Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) <input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. <input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X _____ (Signature of Foreign Representative) _____ (Printed Name of Foreign Representative) _____ Date	
Signature of Attorney* X _____ Signature of Attorney for Debtor(s) _____ Printed Name of Attorney for Debtor(s) _____ Firm Name _____ Address _____ Telephone Number _____ Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Signature of Non-Attorney Bankruptcy Petition Preparer I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. _____ Printed Name and title, if any, of Bankruptcy Petition Preparer Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) _____ Address X _____ _____ Date Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above. Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual. If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. <i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</i>	
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition. X _____ Signature of Authorized Individual _____ Printed Name of Authorized Individual _____ Title of Authorized Individual _____ Date		

B 1D (Official Form 1, Exhibit D) (12/08)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re SINGLETON, ALEXIS E.
Debtor

Case No. _____
(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

B 1D (Official Form 1, Exh D) (12/08) -- Cont.

Page 2

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: Alexis E. Singleton

Date: Dec. 29 2009

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court

Northern District Of Illinois

In re Singleton, Alexis E.
Debtor

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Y		\$ 0	0	
B - Personal Property	Y		\$ 0	0	
C - Property Claimed as Exempt	Y		0	0	
D - Creditors Holding Secured Claims	Y		0	\$	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	X	2	0	\$	
F - Creditors Holding Unsecured Nonpriority Claims	X	12	0	\$ 67,109.60	
G - Executory Contracts and Unexpired Leases			0		
H - Codebtors			0		
I - Current Income of Individual Debtor(s)			\$ 3,332		\$
J - Current Expenditures of Individual Debtors(s)			\$ 2,993		\$
TOTAL			\$	\$ 67,109.60	

Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court

Northern District Of Illinois

In re _____,
Debtor

Case No. _____

Chapter _____

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ <u>0</u>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ <u>0</u>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ <u>0</u>
Student Loan Obligations (from Schedule F)	\$
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ <u>828</u>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ <u>0</u>
TOTAL	\$

State the following:

Average Income (from Schedule I, Line 16)	\$
Average Expenses (from Schedule J, Line 18)	\$
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$
4. Total from Schedule F		\$
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$

B6A (Official Form 6A) (12/07)

In re SINGLETON, AUGUS E.
Debtor

Case No. _____
(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
NONE	NONE	NONE	NONE	NONE

Total ► 0
(Report also on Summary of Schedules.)

B6B (Official Form 6B) (12/07)

In re _____
Debtor

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	✓			
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home- stead associations, or credit unions, brokerage houses, or cooperatives.		HACU \$25 Savings CHASE \$0 CK		
3. Security deposits with public utilities, telephone companies, landlords, and others.	✓			
4. Household goods and furnishings, including audio, video, and computer equipment.		2 TV'S dresser MICROWAVE Bed (Queen) SOFA/LAUNDRY 2 Tables 4 chairs 2 Bar stools		
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		BOOKS - ACADEMIC		
6. Wearing apparel.		CLOTHING, SHOES		
7. Furs and jewelry.	✓			
8. Firearms and sports, photographic, and other hobby equipment.	✓			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	✓			
10. Annuities. Itemize and name each issuer.	✓			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	✓			

B6B (Official Form 6B) (12/07) -- Cont.

In re _____,
Debtor

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	✓			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	✓			
14. Interests in partnerships or joint ventures. Itemize.	✓			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	✓			
16. Accounts receivable.	✓			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	✓			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	✓			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A -- Real Property.	✓			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	✓			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	✓			

B6B (Official Form 6B) (12/07) – Cont.

In re Singleton, Alexis E.
Debtor

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	✓			
23. Licenses, franchises, and other general intangibles. Give particulars.	✓			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	✓			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	✓			
26. Boats, motors, and accessories.	✓			
27. Aircraft and accessories.	✓			
28. Office equipment, furnishings, and supplies.	✓			
29. Machinery, fixtures, equipment, and supplies used in business.	✓			
30. Inventory.	✓			
31. Animals.	✓			
32. Crops - growing or harvested. Give particulars.	✓			
33. Farming equipment and implements.	✓			
34. Farm supplies, chemicals, and feed.	✓			
35. Other personal property of any kind not already listed. Itemize.	✓			
<div style="text-align: right;">_____ continuation sheets attached Total ➤</div>				\$ <u>0</u>

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

B6C (Official Form 6C) (12/07)

In re Singleton, Alexis R.
Debtor

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

- ☐ 11 U.S.C. § 522(b)(2)
☐ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds
\$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION

B6D (Official Form 6D) (12/07)

In re Singleton, Alexis B.
Debtor

Case No. _____
(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.



Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.								
ACCOUNT NO.			VALUES					
ACCOUNT NO.			VALUES					
ACCOUNT NO.			VALUES					
Subtotal ► (Total of this page)							\$	\$
Total ► (Use only on last page)							\$	\$

continuation sheets
— attached

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6D (Official Form 6D) (12/07) – Cont.

2

In re _____, Case No. _____
Debtor (if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					
Sheet no. _____ of _____ continuation sheets attached to Schedule of Creditors Holding Secured Claims	Subtotal (s) ► (Total(s) of this page)						\$	\$
	Total(s) ► (Use only on last page)						\$	\$

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6E (Official Form 6E) (12/07)

In re Singleton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

B6E (Official Form 6E) (12/07) – Cont.

In re Singleton, Alexis E.,
Debtor

Case No. _____
(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

_____ continuation sheets attached

B6E (Official Form 6E) (12/07) – Cont.

In re Singeton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Account No.									
Account No.									
Account No.									
Sheet no. ____ of ____ continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$	\$
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							Total▶	\$	
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							Totals▶	\$	\$

B6F (Official Form 6F) (12/07)

In re Singleton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <small>(See instructions above.)</small>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 08000 13710 Sallie Mae PO Box 9500 Wilkes-Barre, PA 18773-9500			8/2001				\$25,599.10
ACCOUNT NO. DIA ISAPP 21225 NETWORK RD CNGO, IL 60073			8/2004				11,623.88
ACCOUNT NO. 42538 4435 Americredit PO Box 183593 Arlington, TX 76090							4,664.00
ACCOUNT NO. 55758 9632 TMOBILE PO Box 742596 Cincinnati, OH			9/2008				897.07

Subtotal ▶ \$ 42,784.05

Total ▶ \$

1 continuation sheets attached

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

67,109.60

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis E.,
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 820914 4788 AFNI for Ampd MORBID PO BOX 3427 BLOOMINGTON IL 61702			5/2007				4391.24
ACCOUNT NO. 4618874 49300 MACYS PO Box 689195 DES MOINES IA 50368			11/2008				1,741.62
ACCOUNT NO. FX1889911 Target PO Box 51231 Minneapolis MN 55459			6/2008				485.99
ACCOUNT NO. 99230000 2892 COMCAST PO BOX 3001 SOUTHEASTON PA 19398			5/2009				472.43
ACCOUNT NO. 0669111 7084A SWISS Colony 2700 Meridian PKWY #200 Durham NC 27713			8/2007				106.01

Sheet no. 2 of _____ continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal ▶

\$

8165.32

Total ▶

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 77777 279N1 US Cellular 303 N. 114 th St Milwaukee WI 53222 7208			2007				317.91
ACCOUNT NO. 5780045890 1023 First Premier Bank PO BOX 5147 Sioux Falls, SD 57117			2007				709.93
ACCOUNT NO. 87777 4184 Kay Jewelers 410 E. 11th St PO BOX 740425 Cleveland OH 44274			2008				780.00
ACCOUNT NO. 33004710 Cradwicks-WFNNB PO BOX 2036 Warren, MI 48090-2036			?				258.55
ACCOUNT NO. 83720458129 Fingerhut RTM Acquisition 575 Underhill Blvd #24 Syosset NY 11791-3414							208.18
Subtotal ▶							\$ 3275.17
Total ▶							\$

Sheet no. 3 of 3 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <u>013/287240</u> Americash loans 880 Lee St, #302 Des Plaines IL 60014							\$1,805.00
ACCOUNT NO. <u>001221</u> Chgo Cbl/lyn 111 N. Wabash #17A Chgo, IL 60602							\$ 500.-
ACCOUNT NO. <u>27781254</u> Absolute Cdl. Srv 310 Rush St. 421 Fayetteville St, #600 Raleigh, NC 27601							307.-
ACCOUNT NO. <u>0DK</u> NWMFF Superior/Chgo Ave Chgo IL 60611							\$ 600
ACCOUNT NO. <u>431732008069</u> CCS- Plains Comm.BK 2921 Brown Trl #600 Bedford, TX 76021-4144	5001						\$ 409.-
Sheet no. <u>5</u> of _____ continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ 3621.00
							Total ▶ \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4630706013223 PRA 910 HBC CARD SV							\$805.99
ACCOUNT NO. 6921 Express Loans 3915 Mississippi Cahokia, IL 62206							\$360
ACCOUNT NO. 61188117 Premier Bankcard PO Box 129 Throfare, NT 08086							436.89
ACCOUNT NO. 52911520752768809 PRSCIO Capital One PO Box 12914 Norfolk VA 23541							1,193.38
ACCOUNT NO. 00307652 Cavalry Portfolio SV for Sprint PO Box 27288 Tempe AZ 85285-7288							765.61
Sheet no. <u>2</u> of <u> </u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ 3561.87
							Total ▶ \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis E.,
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 636282 1545 708 DMG 1860 Payphere Circle Chgo IL 60674							183.00
ACCOUNT NO. 1004943 RPM PO BOX 768 Bothell, WA 98041-0768							1100.97
ACCOUNT NO. QW4007 Central DuPage Pnt. Group PO BOX 479 Winfield IL 60190							246-
ACCOUNT NO. 543549 001 Central DuPage Hosp 7027 John Deere Pkwy PO Box 672 Moline, IL 61260-0672							45.00
ACCOUNT NO. 8010 Central Furniture 13848 N. Milwaukee Chgo IL 60622							\$290.98
Sheet no. <u>7</u> of _____ continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ 1,894.98
							Total ▶ \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 8718300048 27154 Comcast PO Box 3002 Southampton, PA 193898-3002			2009? Not sure				637.99
ACCOUNT NO. 5101991 CDH 25 N. Winfield Rd Winfield IL 60190			2/21/08				1,334.33
ACCOUNT NO. 193157 Athletico 709 Enterprise Dr. Oak Brook IL 60523							356.80
ACCOUNT NO. Suburban Arms c/o ACB PO BOX 4545 BOSTON Beach, FL 33437			3/2008				310.40
ACCOUNT NO. 2026512-0 West Sub. Pro Receivables 75001 Eagle Way Chicago IL 60678							159.00

Sheet no. 8 of _____ continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal ▶ \$
2798.52

Total ▶

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <u>816 7200</u> Asthma & Allergy Ctr 300 E. Army Trail Rd #403 Bloomington IL 61808			2007				173.60
ACCOUNT NO. <u>5780620072856</u> BLATT, Hanschmiller 2 N. LA SALLE #90 CHGO IL 60602			?				1,212.55
ACCOUNT NO. <u>200422532</u> Quest Diagnostics PO BOX 64500 Baltimore MD 21264			N/A				57.15
ACCOUNT NO. <u>00420214</u> Armor Systems 2322 N. Green Bay Rd Waukegan IL 60087			?				73.44
ACCOUNT NO. <u>0042276.5</u> M Ramez Salem MD 222 E Dundee Rd Wheeling IL 60090							51.50

Sheet no. 9 of _____ continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal▶

\$
1568.24

Total▶

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4273200043 46318 P3B Capital Group 361 Ellcott St, 3rd Fl Buffalo, NY 14203							354.72
ACCOUNT NO. 017007200 Univ. Anesthesiologists Lock Box 128 Glenview IL 60025			2008/2009				733.00
ACCOUNT NO. 0408005 Dr. Augusty/singh FCC Columbus PO BOX 20790 Columbus, OH							119.00
ACCOUNT NO. 0116006 FFCC-Corneo Endodontics PO BOX 20790 Columbus OH 43220			Feb 2008				237.00
ACCOUNT NO. 4273200043 46318 Plains Commerce Bank PO BOX 89997 Sioux Falls, SD 57109							336.

Sheet no. 10 of continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal▶

\$

1779.72

Total▶

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis E.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <u>5102921930</u> City of Chgo Dept of Revenue PO Box 88292 Chgo IL 60680-1292			2009				549.17
ACCOUNT NO. <u>0000164190</u> Village Radiosh 121 S. Marion Oak Park IL 60301							43.00
ACCOUNT NO. <u>0000002720</u> Alverno Clinical Labs 585 W. Laus St #300 Kankakee IL 60901							85.00
ACCOUNT NO. <u>9474</u> Renehart CM for Repro. PO Box 219 OSwego IL 60543							35.00
ACCOUNT NO. <u>00002717</u> Biehl + Biehl PO Box 87410 Carol Stream IL 60188							23.66

Sheet no. 11 of continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal ▶

\$

735.83

Total ▶

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Singleton, Alexis R.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <u>XXX-XX-8618</u> <u>IDS- Benefits Repayment</u> <u>PO Box 6996</u> <u>CHGO IL 60680</u>							<u>250.00</u>
ACCOUNT NO. <u>40835</u> <u>Charles E Miles, MD</u> <u>23862 Network Place</u> <u>CHGO IL 60673</u>							<u>50.00</u>
ACCOUNT NO. <u>09117285</u> <u>AT&T & Cavalry</u> <u>PO Box 27288</u> <u>Tempe AZ 85282</u>							<u>102.28</u>
ACCOUNT NO.							
ACCOUNT NO.							
Sheet no. <u>12</u> of _____ continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal ▶ \$ <u>402.28</u>
							Total ▶ \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B6H (Official Form 6H) (12/07)

In re Singleton, Alexis R.,
Debtor

Case No. _____
(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

B61 (Official Form 61) (12/07)

In re Singleton, Alexis E.,
Debtor

Case No. _____
(if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S):	AGE(S):
Employment:	FOX, HEFTER, Swibel DEBTOR A Singleton	SPOUSE
Occupation	Paralegal	
Name of Employer	FOX, HEFTER, Swibel, Levin & Carradi	
How long employed	< 1 yr	
Address of Employer	200 W. Madison St., #3000 CHI	

INCOME: (Estimate of average or projected monthly income at time case filed)

- Monthly gross wages, salary, and commissions
(Prorate if not paid monthly)
- Estimate monthly overtime

3. SUBTOTAL

4. LESS PAYROLL DEDUCTIONS

- Payroll taxes and social security
- Insurance
- Union dues
- Other (Specify): CHILD SUPPORT
company phone

5. SUBTOTAL OF PAYROLL DEDUCTIONS

6. TOTAL NET MONTHLY TAKE HOME PAY

7. Regular income from operation of business or profession or farm
(Attach detailed statement)

8. Income from real property

9. Interest and dividends

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

11. Social security or government assistance
(Specify): _____

12. Pension or retirement income

13. Other monthly income
(Specify): _____

14. SUBTOTAL OF LINES 7 THROUGH 13

15. AVERAGE MONTHLY INCOME (Add amounts on lines 6 and 14)

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

DEBTOR

SPOUSE

\$ 2,332

\$ _____

\$ 0

\$ _____

\$ 3,332

\$ _____

\$ 330

\$ _____

\$ 465

\$ _____

\$ 0

\$ _____

\$ 828

\$ _____

\$ 100

\$ 1723

\$ _____

\$ 1609

\$ _____

\$ 0

\$ _____

\$ 0

\$ _____

\$ 0

\$ _____

\$ 0

\$ _____

\$ 0

\$ _____

\$ 0

\$ _____

\$ 0

\$ _____

\$ 0

\$ _____

\$ 1609

\$ _____

\$ _____

\$ _____

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

NAME OF CREDITOR WITH COMPLETE ADDRESS	NAME, TELEPHONE NUMBER & COMPLETE MAILING ADDRESS	NATURE OF CLAIM	INDICATE IF CLAIM IS CONTINGENT, UNLIQUIDATED, DISPUTED OR SUBJECT TO SETOFF	AMOUNT OF CLAIM(If secured also state value of security)
Americredit PO BOX 183593 Arlington, TX 76096-3593 (800) 365-3635 Acct#425384435	Loss Recovery Department (800) 365-3635			\$4664.00
T-Mobile P.O. Box 742596 Cincinnati, OH 45274- 2596 Acct#557529632	Customer Service (800) 937-8997			\$897.07
AFNI for Amp'd Mobile PO BOX 3427 Bloomington, IL 61702 Acct#2029194788	Customer Service (866) 811-0091			\$359.24
Macy's P.O. Box 689195 Des Moines, IA 50368 Acct# 437087449300	Collections (866) 643-6845			\$1,741.62
Target National Bank c/o Payment Processing PO Box 59231 Minneapolis, MN 55459- 0231 Acct#F-8629911	Customer service (800) 328-0780			\$485.99
Comcast Cable PO Box 3001 Southeastern PA 19398- 3001 Acct#8798 30 004 8202892	Customer Service (866) 594-1234			\$472.43
Swiss Colony c/o Professional Recovery Consultants, Inc. 2700 Meridian Pkway, Suite 200 Durham, NC 27713-2204 Acct# 066294797084A	(800) 840-1036			\$106.01
Account Recovery Services c/o US CELLULAR 303 N 114 th St				\$317.91

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Milwaukee, WI 53222-4208 (800) 598-5521 Acct# D2342279N1				
First Premier Bank Acct# 5178 0071 5890 2023 PO BOX 5147 Sioux Falls, SD 57117-5147	(800) 987-5521			\$436.89
Kay Jewelers PO Box 740425 Cincinnati, OH 45274-0425 Acct#8001914184 In Collections w/Blitt & Gaines, P.C. 661 W. Glenn Avenue Wheeling, IL 60090	(847) 403-4900			\$709.93
Fingerhut c/o RJM Acquisitions Funding LLC 575 Underhill Blvd., suite 224 Syosset, NY 11791-3416 Acct317728458129	(800)86-0026			\$208.18
Asset Acceptance c/o Chadwicks (WFNNB) PO Box 2036 Warren, MI 48090-2036 Acct#38524710	(800)545-9931			\$258.55
Aspire Visa c/o Midland Credit Management, Inc PO Box 60578 Los Angeles, CA 90060-0578 Acct#8527676031	(800) 825-8131			\$1,033.15
Salute Payment Processing PO Box 11802 Newark, NJ 07101-8102 Acct#4146830009225746				\$646.04
Resurrection West				\$1,646.00

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Suburban Medical Center 3 Erie Court Oak Park, IL 60302 Acct: 09113-00134				\$ 29.76
Resurrection Amb Care Services PO Box 6670 River Forest, IL 60305- 6670 Acct# 10-28344-8	(708) 524-5531			\$60.00
Sallie Mae Student Loans PO BOX 9500 Wilkes-Barre, PA 18773- 9500 Acct# 9306013710				\$25,599.10
Sprint PO BOX 7993 Overland Park, KS 66207-0993 Acct: 698306299				\$753. 67
Americash Loans 880 Lee Street, Suite 302 Des Plaines, IL 60016 847-827-9740 Acct: 3134287240	(847) 827-9740			\$1,805.00
Chicago Obstetrics & Gynecology 111 N Wabash Avenue Suite 1717 Chicago, IL 60602 Acct#001221	(312) 346-6330			\$360.00
Absolute Collection Services c/o Rush University	(919) 755-3900			\$307.00

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

421 Fayetteville St., #600 Raleigh, NC 27601 Acct#21781254				
Northwestern Memorial Hospital				\$600.00
Complete Credit Solution for Plains Commerce Bank 2921 Brown Trl #100 Bedford, TX 76021-4144 Original Acct#4317 3200 8037 5001 Acct# D59490N1	(800) 609-1144			\$409
Portfolio Recovery Associates, LLC c/o HSBC Card Services Orchard Bank Acct# 4663090006673223	(800) 772-1413			\$805.99
Express Loans 3915 Mississippi Cahokia, IL 62206 Acct#6921	(312) 341-2945			\$360
IDAPP Student Loans 21225 Network Place Chicago, IL 60673-1212	(800) 366-5755			\$20,000. \$11,623.88
Premier Bankcard, Inc. ARM – Accounts Receivable Management, Inc. P O Box 129 Thorofare, NJ 08086-				\$436.89

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

0129 (866) 932-6778 Acct#517800715890203 ARM Acct #14188117				
Portfolio Recovery Associates, LLC c/o Capital One National Association P.O. Box 12914 Norfolk, VA 23541 (800) 772-1413 Acct #: 52911520354768809				\$1193.38
Cavalry Portfolio Services, LLC For Sprint Acct# 0053087652 Cavalry Acct # 02658178 PO Box 27288 Tempe, AZ 85285-7288				\$765.61
DuPage Medical Group 1860 Paysphere Circle Chicago, IL 60674 Acct# 636282- 69575708				\$183.00
RPM PO BOX 768 Bothell, WA 98041- 0768 877/233-8521 Ref#: 11014943				\$1100.97
Central DuPage Physician Group				\$246.00

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

PO BOX 479 Winfield, IL 60190-0479 (630) 933-1701 Acct#9144007				
Central DuPage Hospital c/o HR Accounts, Inc. 7027 John Deere Pkway PO Box 672 Moline, IL 61266-0672 Acct# 5430549001 H&R Acct # 3723003	(800) 308-8385			\$75.00
Central Furniture 1348 N. Milwaukee Ave. Chicago, IL 60622 Acct# 8010	(773) 486-7838			\$290.98
Comcast Acct#8798 30 004 8637154 PO BOX 3002 Southeastern, PA 193898-3002	(866) 594-1234			\$637.99
Central DuPage Hospital 25 N. Winfield Rd. Winfield, IL 60190-1295 Acct#5469991 Date of Service: 2/21/2008	(630) 933-4066			\$1,334.33
Athletico Acct#193157 709 Enterprise Drive Oak Brook, IL 60523- 8814	(630)575-6250			\$356.80

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

American Credit Bureau for Suburban Orthopaedics PO BOX 4545 Boyton Beach, FL 33437 Acct#253785	(800) 750-9422			\$310.40
West Suburban Pro Receivables 35001 Eagle Way Chicago, IL 60678-1350 Acct#20-26512-0	(708) 524-5531			\$159.00
Asthma & Allergy Center 300 E Army Trail Road Suite 403 Bloomington, IL 60108 Acct# 8187200	(630) 894-7083			\$173.60
Law Offices of Blatt, Hasenmiller, Leibsker & Moore, LLC 2 North LaSalle, Suite 900 Chicago, IL 60602 Acct# 5178051288332858	(312) 704-9440			\$1212.55
Quest Diagnostics Inc. PO Box 64500 Baltimore, MD 21264- 4500 Invoice No.: 12604622532	(800) 888-8333			\$57.15
Armor Systems Corp. 2322 N. Green Bay Rd. Waukegan, IL 60087-	(847) 249-0576			\$73.44

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

4209 Acct# 10420214				
M. Ramez Salem MD & Associates 222 E. Dundee Road Wheeling, IL 60090- 3009 Acct#70319276-5	(847) 520-0235			\$51.50
P&B Capital Group, LLC 361 Ellicott St., 3 rd Floor Buffalo, NY 14203 Orig Acct #: 4317320071346318	(888) 569-9635			\$354.72
University Anesthesiologists, S.C. LOCK BOX 128 Glenview, IL 60025 Acct# UNP-90107200	(847) 679-6363			\$733.00
Drs. Augustyn & Singh FFCC – Columbus PO BOX 20790 Columbus, OH 43220 Acct# 10408005	(614) 358-9900			\$119.00
FFCC – Columbus for Endodontics POP Box 20790 Columbus, OH 43220 Acct# 9116006	(614) 358-9900			\$237.00
Plains Commerce Bank PO Box 89937 Sioux Falls, SD 57109- 6140	(800) 800-2143			\$336.00

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Acct# 4317320071346318				
City of Chicago Dept. of Revenue PO BOX 88292 Chicago, IL 60680-1292 Notice No.: 5102921930	(312) 744-7275			\$549.17 as of 11/28/09 Notice
Village Radiology Acct No.: 01-01- 01134190 121 N. Marion St. Oak Park, IL 60301-1166	(708) 386-6565			\$43.00
Alverno Clinical Laboratories LLC 555 W Court St., #300 Kankakee, IL 60901- 3600 Acct# VD0001142720	(877) 937-2190			\$85.00
Rinehart Center for Reproduction Med Sc P O Box 219 Oswego, IL 60543-0219 Acct# 9474	(800) 423-7380			\$35.00
Biehl & Biehl for Daily Herald Circulation PO Box 87410 Carol Stream, IL 60188- 7410 Acct# 4482717	(800) 837-2434			\$23.66
I.D.E.S. Benefits Repayments PO Box 6996	(800) 245-9762			\$250.00

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Chicago, IL 60680-6996 Acct# xxx-xx-8618				
Charles E. Miller, MDSC 23862 Network Place Chicago, IL 60673-1238 Acct No.: 10835	(847) 593-1040			\$50.00
Calvary Portfolio Services, LLC PO BOX 27288 Tempe, AZ 85282-7288 Original Acct# 351537893501 Cavalry Acct No.: 09119285	(800) 501-0909			\$102.28